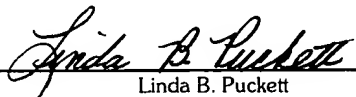


2124

PATENT

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on April 20, 2004.


Linda B. Puckett

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Chinning Q. Yang, et al.
Application No.: 09/870,026
Filed: May 30, 2001
Title: **Implementation to Avoid Overflow in IIR Filter**
Art Unit: 2124
Examiner: Tan V. Mai
Atty Docket No.: SONY-89

RECEIVED

APR 23 2004

Technology Center 2100

Cincinnati, Ohio 45202

April 20, 2004

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. ☐ Small Entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
☐ Enclosed is a verified statement to establish small entity status.
☒ Other Than a Small Entity.
3. The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		LARGE ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
TOTAL	25	MINUS	25	0	x 9	\$0	x18	\$ -0-
INDEP.	3	MINUS	3	1	x43	\$0	x86	\$ -0-
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+145	\$0	+290	\$ -0-
					TOTAL FEE	\$0	TOTAL FEE	\$ -0-

 X No additional fee for claims is required.

4. Attached is a check in the sum of \$____.

____ Please charge my Deposit Account No. 23-3000 in the amount of \$____. A duplicate copy of this sheet is attached.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

(a) ____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
____ one month	\$ 110.00	\$ 55.00
____ two months	\$ 410.00	\$ 205.00
____ three months	\$ 930.00	\$ 465.00
____ four months	\$1,450.00	\$ 725.00
____ five months	\$1,970.00	\$ 985.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

____ An extension for ____ months has already been secured and the fee paid therefor of ____ is deducted from the total fee due for the total months of extension now requested.

____ Extension fee due with this request \$ ____.

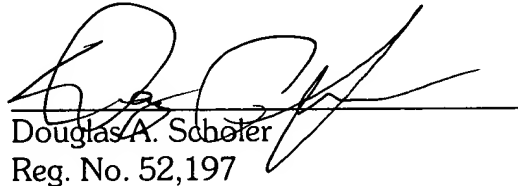
____ A check in the amount of \$ ____ is enclosed.

____ Please charge my Deposit Account No. 23-3000 in the amount of \$ ____ . A duplicate copy of this sheet is attached.

OR

(b) X Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

6. If any additional fee is required, please charge Deposit Acct. No. 23-3000.



Douglas A. Schöler
Reg. No. 52,197

WOOD, HERRON & EVANS, L.L.P.
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441 Vine Street
Cincinnati, Ohio 45202
(513) 241-2324 (voice)
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